DEPARTMENT OF HEALTH AND FAMILY SERVICES Division of Disability and Elder Services Printed 08/18/2006

Provider Inspection Summary

For the period 07/01/2003 to 06/30/2006 Adult Family Home STATE OF WISCONSIN
Bureau of Quality Assurance
P.O. Box 2969
Madison WI 53701-2969

Facility Information

Facility Name: UNION HOUSE (490073)

Address: 1411 UNION AVE, SHEBOYGAN, WI 53081

License Status: REGULAR

Licensed/Certified/Registered 08/01/1990

Regional Office: NORTHEASTERN REGION (GREEN BAY), (920) 448-5240

Survey History

Survey ID: 0093557 End Date: 11/02/2004 Type: ABBREVIATED Purpose: SURVEY/SELF REPORT

Results: STATEMENT OF DEFICIENCY ISSUED

Statement of Deficiency: #10007037 Served 11/08/2004

Deficiencies Cited Subject Area Subject Area Verified Corrected 88.04(5)(a) TRAINING-15 HOURS WITHIN 6 MONTHS

88.04(5)(b) TRAINING-8 HOURS ANNUALLY

88.05(3)(e)2.b INSPECTIONS-GAS FURNACE 88.05(4)(d)2.b FIRE EVACUATION ANNUAL EVALUATION

88.10(3)(1) SAFE PHYSICAL ENVIRONMENT